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Conversion of Specialized Care and Long Stay Hospital Service Types in the Keystone Peer Review Organization (KePRO) Web Portal from Inpatient to Outpatient and the Service Authorization Information Checklist

Conversion of Specialized Care/Long Stay Hospital Service Types in the KePRO Web Portal

Effective June 1, 2013, Specialized Care and Long Stay Hospital (SC/LSH) providers must submit service authorization requests to KePRO as an outpatient request, as opposed to an inpatient request. Treating the service as inpatient in KePRO's Web Portal has the unfortunate effect of requiring the provider to create a new case following every overnight leave from the facility. This change will allow providers to submit extension requests for authorization dates that are not contiguous with a previous span without having to build a new case. This change has *no impact* on billing or claims processing.

Service Authorization Information Checklist for Easier Submission

The Service Authorization Information checklist for Specialized Care/Long Stay Hospital requests is now available. The checklist assists providers with the type of clinical information needed by KePRO to review each request and will reduce the amount of clinical information that is currently faxed to KePRO. Utilization of this checklist will provide a more concise service authorization request with appropriate clinical information. This will decrease the number of cases pended for additional clinical information and speed up the processing time. The checklist may be used as a tip sheet for all of the important items to include in your request, or as a template for your actual request where you would edit, copy, and paste into Atrezzo. **Be sure to check your document before transmission, as some characters may change during the copy/paste process.** The checklist is available on the KePRO web site at <https://dmas.kepro.org>.

To assist providers in making the transition to submitting Specialized Care/Long Stay Hospital requests as outpatient and for more information on the Service Authorization Information Checklist, KePRO will conduct a live Webinar on Thursday May 23, 2013 at 10:00 a.m. and a



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follow-up Webinar on Tuesday June 11, 2013 at 10:00 a.m. The connection information for this webinar is:

Telephone Conference Call: 866-754-2932
6815237722# Webinar URL:
<http://kepro.adobeconnect.com/r8qgf203714/>

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Methods of Submission to KePRO

All submission methods and procedures are fully compliant with the Health Insurance Portability and Accountability Act (HIPAA) and other applicable federal and state privacy and security laws and regulations. Providers will not be charged for submission, via any media type, for service authorization requests submitted to KePRO.

KePRO accepts service authorization (srv auth) requests through direct data entry (DDE), fax and phone. Submitting through DDE puts the request in the worker queue immediately; faxes are entered by the administrative staff in the order received. For direct data entry requests, providers must use Atrezzo Connect Provider Portal. For DDE submissions, service authorization checklists may be accessed on KePRO's website to assist the provider in assuring specific information is included with each request. To access Atrezzo Connect on KePRO's website, go to <http://dmas.kepro.com>.

Provider registration is required to use Atrezzo Connect. The registration process for providers occurs immediately on-line. From <http://dmas.kepro.com>, providers not already registered with Atrezzo Connect may click on "Register" to be prompted through the registration process. Newly registering providers will need their 10-digit National Provider Identification (NPI) number and their most recent remittance advice date for YTD 1099 amount. The Atrezzo Connect User Guide is available at <http://dmas.kepro.com>: Click on the *Training* tab, then the *General* tab. Providers with questions about KePRO's Atrezzo Connect Provider Portal may contact KePRO by email at atrezzoissues@kepro.com. For service authorization questions, providers may contact KePRO at providerissues@kepro.com. KePRO



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may also be reached by phone at 1-888-827-2884, or via fax at 1-877-OKBYFAX or 1-877-652-9329.

Failure to acquire a service authorization for services requiring an authorization may result in non payment for the service rendered.

VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, check status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the Xerox State Healthcare Web Portal Support Helpdesk, toll free, at 1-866-352- 0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access service authorization information including status via KePRO's Provider Portal at <http://dmas.kepro.com>.

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.